#### **LOWELL HISTORIC BOARD**



**ADDRESS** 

I.

# APPLICATION for

### HISTORIC PERMIT



## CERTIFICATE OF NONAPPLICABILITY



ANDOVER STREET, BELVIDERE HILL, ROGERS FORT HILL PARK, SOUTH COMMON, TYLER PARK, WANNALANCIT STREET, WASHINGTON SQUARE, & WILDER STREET NEIGHBORHOOD DISTRICTS

| PPLICANT   | PHONE #  |
|--|--|
| DDRESS   | ZIP CODE   |
| ROPERTY OWNER  | PHONE #  |
| DDRESS   |  |
| RCHITECT (if applicable)   | PHONE #  |
| DDRESS   | ZIP CODE   |
| ONTRACTOR (if applicable)  | PHONE #  |
| DDRESS   | ZID CODE   |
| ESCRIPTION OF PROPOSED WORK (This descript bsequent decision, and must clearly represent the entirety of | ion provides the basis for the official notice and                         |
| ESCRIPTION OF PROPOSED WORK (This descript   | ion provides the basis for the official notice and                         |
| ESCRIPTION OF PROPOSED WORK (This descript   | ion provides the basis for to the project. Use addition CRMITS OR APPROVAL |

| VI.       | DOCUMENTATION SUBMITTED (Incomple  | ete application.   | s will be returned)                                 |  |  |
|-----------|--|--|---|--|--|
|           | □ PHOTOGRAPHS (with labels) □ SHOP DRAWINGS, SKETCHES □ MFGR's. LITERATURE, SPECS. □ BUILDING PLANS, ELEVATIONS, S   | SECTIONS   | □ BLOCK PLAN □ SITE PLAN □ MATERIAL/COLOR SAMPLES   |  |  |
| VII.      | ARE YOU SEEKING/UTILILZING FINANC  | CIAL ASSIST.   | ANCE/INCENTIVES FROM SOURCES OTHER                  |  |  |
|           | THAN CONVENTIONAL FINANCING?   | □ YES  | □NO   |  |  |
|           | , i  | □ TAX CRED<br>□ LDFC   | OWELL □ REVENUE BONDS DITS/DEPRECIATION             |  |  |
| VIII.     | AUTHORIZATION (Both signatures required)   |  |   |  |  |
| I I<br>pl | hereby give permission for this application to be file laced on the property relative to the approval of the PROPERTY OWNER  (If property is a condominium or cooperative, the | ed with the ful<br>proposed work   | l understanding that certain restrictions may be k. |  |  |
| A         | PPLICANT   |  | DATE  |  |  |
|           | FEE S  | CHEDULE  |   |  |  |
|           | OTAL PROJECT COST  |  |   |  |  |
|           |  | NON-PROFIT ORGANIZATONS 50% of above but never less than minimum noted above |   |  |  |
|           |  |  |   |  |  |
|           |  |  | PLEASE MAKE CHECKS PAYABLE<br>TO                    |  |  |
| <u>F0</u> | OR OFFICIAL USE ONLY:  |  | "CITY OF LOWELL"                                    |  |  |
|           | PPLICATION#OATE RECEIVED   |  | SUBMIT APPLICATIONS IN PERSON<br>OR BY MAIL TO:     |  |  |
| E         | FF PAID  |  | LOWELL HISTORIC BOARD                               |  |  |

NONAPPLICABILITY □

J.F.K. CIVIC CENTER 50 ARCAND DRIVE LOWELL, MA 01852 978-970-4270 978-970-4262 FAX sstowell@ci.lowell.ma.us http://www.historiclowell.net

HEARING DATE

ALTERATIONS: MAJOR □

MINOR □